Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>04/19/2010</u>	Address;	<u>6926 SR</u> 2 <u>44,</u>
Case #;	<u>41-21</u> 00 <u>1</u>		Rushville, IN 46
County:	Rush		_ _
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			theck all that apply)
	onal Lab al/Glasswarc/Equipment (only) ite (only)	☐ Residence☐ Outbuilding☐ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents: Garage			
Water Reactive Metal (Lithium): Burn Pile/Garage			
Anhydrous Ammonia: Garage			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: <u>Under kitchen sink</u>			
Corrosive Base:			
Other (item and location): Pseudocphedrine, Burn Pile			
☐ Yes ⊠ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrine	<u>Information</u> Pseudocphodrine Tracking Log erchant Tip
This report	t is to be faxed to the following agen	cies that serve the lo	eation;
Fire Departs	ment: Rushville	Fax: <u>765-9</u>	 -
Health Department: Rush County		Fax: <u>765-9'</u> Fax: <u>765-9'</u>	_ <u>_</u>
Child Protec	ction Service: Rush County	. w	The second secon
For further i	information regarding this methampha g Officer: <u>Franklin</u> Phor	etamine laboratory, ed ne <u>76</u> 5-825-2115	outact

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.